Fill in this information to identify your case:				
Debtor 1	Michael Prairie			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	FLORIDA	
Case number	6:16-bk-05716			
()				

Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	209,110.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,422.24
	1c. Copy line 63, Total of all property on Schedule A/B	\$	214,532.24
Paı	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	270,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	69,997.00
	Your total liabilities	\$	339,997.00
⊃aı	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,052.19
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,006.50
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

10/27/17 1:01PM

Debtor 1 Michael Prairie Case number (if known) 6:16-bk-05716

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 4,125.32

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this information	on to identify your case:	
Debtor 1	Michael Prairie	
Debtor 2 (Spouse, if filing)		
United States Bank	cruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
_	6:16-bk-05716	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	m 106I	MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	1099 employee driver	Freelance Make up artist
	Include part-time, seasonal, or self-employed work.	Employer's name	Prime Time Parking, LLC and	I 14136 Bradbury Road
	Occupation may include student or homemaker, if it applies.	Employer's address	3847 MILLENIA BLVD Apt. 101 Orlando, FL 32839	Orlando, FL 32828
		How long employed t	here? Started Jan, 2017	10 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 2,062.75 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 2,062.75 0.00

Official Form 1061 Schedule I: Your Income page 1

10/27/17 1:01PM

Debt	tor 1	Michael Prairie	_	Cas	e number (if known)	6:1	6-bk-05	716	
				Fo	or Debtor 1		or Debtor on-filing s		
	Cop	y line 4 here	4.	\$	2,062.75	\$		0.00	)
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	279.76	\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	130.80	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	_
	5e.	Insurance	5e.	\$	0.00	\$		0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	<u> </u>
	5g.	Union dues	5g.	\$	0.00	\$		0.00	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$ -		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	410.56	\$		0.00	_
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,652.19	\$		0.00	_
8.		all other income regularly received:		· -	.,				_
0.	8a.	Net income from rental property and from operating a business,							
		profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total	00	æ	4 000 00	æ		000 00	
	8b.	monthly net income.  Interest and dividends	8a. 8b.	\$ \$	1,600.00	\$ \$		800.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Φ_	0.00	Φ_		0.00	<u>)</u>
	oc.	regularly receive	•						
		Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.	\$	0.00	\$		0.00	)_
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	)
	8e.	Social Security	8e.	\$	0.00	\$		0.00	<u>)                                    </u>
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	3						
		Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$	0.00	\$		0.00	)
	8g.	Pension or retirement income	8g.	\$	0.00	\$		0.00	<u> </u>
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$ -		0.00	)
						Γ.			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,600.00	\$_		800.0	00
10.		•	10.   \$		3,252.19 + \$		800.00	= \$_	4,052.19
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						ı	
11.		e all other regular contributions to the expenses that you list in Schedule							
		ude contributions from an unmarried partner, members of your household, your	depend	dent	s, your roommates	s, and	i		
		r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	availah	le to	nav exnenses list	ed in	Schedule	ا. د	
	Spe		avanab	.0 10	pay expenses not	ou		+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The res					e.		
		e that amount on the Summary of Schedules and Statistical Summary of Certai	in Liabil	ities	and Related Data	ı, if it	12.	2	4,052.19
	app	les					12.	lacksquare —	.,0020
								Combi	
12	Do :	you expect an increase or decrease within the year after you file this form	2					month	ly income
13.	<b>5</b> 0 ;	No.	•						
	_	Yes Explain:							

Filli	n this infor	mation to identify ye	our case:					
Debt		Michael Prai				Ch	eck if this is:	
							An amended filing	
Debt (Spc	tor 2 buse, if filing)							wing postpetition chapter the following date:
Unite	ed States Ba	nkruptcy Court for the	: MIDDL	E DISTRICT OF FLORIDA			MM / DD / YYYY	
	e number nown)	6:16-bk-05716						
Of	ficial F	orm 106J						
Sc	hedu	le J: Your	Exper	nses				12/15
info	rmation. If nber (if kno	more space is ne own). Answer eve scribe Your House	eded, atta ry questio	. If two married people ar ach another sheet to this t on.				
1.	Is this a j	oint case?						
	■ No. Go	o to line 2.	in a separ	rate household?				
	_	No Yes. Debtor 2 mu	st file Offic	ial Form 106J-2, Expenses	for Separate House	hold of De	ebtor 2.	
2.	Do you h	ave dependents?	■ No					
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not sta dependen							□ No □ Yes □ No
								☐ Yes ☐ No
								☐ Yes
								□ No □ Yes
3.	expenses	expenses include s of people other t and your depende	han _	l No l Yes				☐ Yes
ехр	mate your	of a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		uch assistance an		government assistance it cluded it on Schedule I: Y			Your exp	enses
4.		al or home owners and any rent for th		nses for your residence. In or lot.	nclude first mortgage	4.	\$	1,658.50
	If not incl	uded in line 4:	-					
	4a. Rea	al estate taxes				4a.	\$	0.00
		perty, homeowner's	s, or rente	r's insurance		4b.	·	0.00
		me maintenance, re	•			4c.		120.00
5		neowner's associa			mo oquity loops	4d. 5.	· -	100.00
5.	Auditiofic	ai inortyaye payin	ento iui y	<b>our residence,</b> such as ho	ne equity loans	ິນ.	Ψ	0.00

Deb	otor 1	Michael	Prairie	Case nur	nber (if known)	6:16-bk-05716
6.	Utilit	ios.				
0.	6a.		, heat, natural gas	6a	. \$	375.00
	6b.		wer, garbage collection		. \$	50.00
	6c.		e, cell phone, Internet, satellite, and cable services		\$	225.00
	6d.	Other. Spe		6d		0.00
7.			ekeeping supplies		· .	583.00
8.			children's education costs	8	·	0.00
9.			ry, and dry cleaning	9	·	50.00
		-	products and services		. \$	200.00
11.		-	ntal expenses		. \$	0.00
			Include gas, maintenance, bus or train fare.		· • —	
			ar payments.	12	. \$	165.00
13.			clubs, recreation, newspapers, magazines, and books	13.	. \$	20.00
14.	Char	itable cont	ributions and religious donations	14	. \$	0.00
15.	Insur	rance.	-			
			nsurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insura	ance	15a	. \$	0.00
	15b.	Health ins	urance	15b	. \$	300.00
	15c.	Vehicle in:	surance	15c	. \$	160.00
	15d.	Other insu	ırance. Specify:	15d	. \$	0.00
16.			nclude taxes deducted from your pay or included in lines 4 or 20	).		
	Spec	•		16	. \$	0.00
17.			ease payments:		_	
			ents for Vehicle 1	17a		0.00
			ents for Vehicle 2	17b	·	0.00
		Other. Spe	-	17c	· -	0.00
		Other. Spe		17d	. \$	0.00
18.			of alimony, maintenance, and support that you did not rep		. \$	0.00
10			your pay on line 5, Schedule I, Your Income (Official Form sounds you make to support others who do not live with you.	1061).	. Ψ \$	
19.	Spec		s you make to support others who do not live with you.	19	·	0.00
20		·	erty expenses not included in lines 4 or 5 of this form or or			
20.			s on other property	20a		0.00
		Real estat		20b		0.00
			homeowner's, or renter's insurance	20c	·	0.00
			nce, repair, and upkeep expenses	20d	· <u> </u>	0.00
			er's association or condominium dues	20e		0.00
21		r: Specify:	or a accordation or condominant acco		. +\$	0.00
۷١.	Othe	a. opecity.			. 'Ψ	0.00
22.	Calc	ulate your	monthly expenses			
			through 21.		\$	4,006.50
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2	\$	
	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	4,006.50
00	٠.					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
23.		-	monthly net income.	00	•	4.000.40
			12 (your combined monthly income) from Schedule I.	23a		4,052.19
	23b.	Copy your	monthly expenses from line 22c above.	23b	\$	4,006.50
	220	Cubtract	your monthly avanged from your monthly income			
	23C.		our monthly expenses from your monthly income.  is your monthly net income.	23c	.   \$	45.69
		THE TESUIL	. 19 your monthly fiet income.		<u> </u>	
24.	Do v	ou expect a	an increase or decrease in your expenses within the year a	fter you file thi	s form?	
	For ex	xample, do yo	ou expect to finish paying for your car loan within the year or do you expe			ease or decrease because of a
			terms of your mortgage?			
	■ No	0.				
	□Y€	es	Explain here:			

# United States Bankruptcy Court Middle District of Florida

In re	wiichae	ei Prairie			Case No.	6:16-DK-U5/16
				Debtor(s)	Chapter	13
		DECLARAT	<u>ION UNDER PENAI</u>	LTY OF PERJURY F	OR ELECTRON	<u>IIC FILING</u>
	T1	11	Mish and Doniels	111	- C	
	rne un	ndersigned,	Wilchael Prairie	, declares under penalty	or perjury man:	
	1.	I have signed Document(s)		ocument(s) identified be	elow under penalty	of perjury ("Verified
	2.	The informat and belief.	ion contained in the Ve	rified Document(s) is tr	ue and correct to t	he best of my knowledge
	3.			nent(s) are to be filed in the above captioned ca		ith the United States
October 27, 2017		17		?		
Execu	ted on (	Date)	Michael Prairie	the transfer of the same of th		
		)	Signature of Debtor			
			or other claimant			
			<u>Ve</u>	rified Document(s):		
Full D	escripti	ve Title			Date Executed	
		nedule I&J			October 27, 20	17
					-	
					-	

## United States Bankruptcy Court Middle District of Florida

In re	Michael Prairie		Case No.	6:16-bk-05716
		Debtor(s)	Chapter	7

#### **CERTIFICATE OF SERVICE**

I hereby certify that on <u>October 27, 2017</u>, a copy of <u>Amended schedule I&J</u> was served electronically or by regular United States mail to all interested parties, the Trustee and all creditors listed below.

Amex
Avalon Park Property Owners
Bankamerica
Bankamerica
Bmw Financial Services
Capital One
Chase Card
Chase Card
Citi
Discover Fin Svcs Llc
Discover Fin Svcs Llc
Dsnb Macys
First Premier Bank
NATIONAL MORTGAGE LLC
Wells Fargo
Wf PII

/s/ Elayne M. Conrique

Elayne M. Conrique
Perez Conrique Law
746 N Magnolia Avenue
Orlando, FL 32803
407-545-4400Fax:407-545-4401
bankruptcyecf@perezconrique.com

Label Matrix for local noticing Case 6:16-bk-05716-CCJ Doc 99 Filed 10/27/17 P.O. Box 201347

Case 6:16-bk-05716-CCJ Middle District of Florida Orlando

Fri Oct 27 13:05:05 EDT 2017

MTGLO Investors, L.P. c/o Lindsey Savastano Shapiro, Fishman & Gache, LLP 2424 North Federal Highway Suite 360

Boca Raton, FL 33431-7701

Michael Prairie 14136 Bradbury Rd Orlando, FL 32828-4880

Amex Po Box 297871 Fort Lauderdale, FL 33329-7871

(p) BMW FINANCIAL SERVICES CUSTOMER SERVICE CENTER PO BOX 3608 DUBLIN OH 43016-0306

(p) BANK OF AMERICA PO BOX 982238 EL PASO TX 79998-2238

Citi Po Box 6241 Sioux Falls, SD 57117-6241

Discover Bank Discover Products Inc PO Box 3025 New Albany, OH 43054-3025

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4868

LVNV Funding, LLC its successors and assigns assignee of FNBM, LLC Resurgent Capital Services PO Box 10587 Greenville, SC 29603-0587

Arlington, TX 76006-1347

MTGLQ Investors, L.Pc/oShellpointMortgageServ POB 10826 Greenville, SC 29603-0826

Recovery Management Systems Corp. Attn: Ramesh Singh 25 SE Second Avenue, Ste 1120 Miami, FL 33131-1605

Avalon Park Property Owners 3680 Avalon Park E Blvd □120 Orlando, FL 32828-9373

BSI Financial Services 314 S. Franklin Street Titusville, PA 16354-2168

(p) CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130-0285

Comenity Capital Bank/Paypal Credit c/o Weinstein & Riley, PS 2001 Western Ave., Ste 400 Seattle, WA 98121-3132

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850-5316

Florida Department of Revenue Bankruptcy Unit Post Office Box 6668 Tallahassee FL 32314-6668

MTGLQ Investors, L.P. c/o Lindsey Savastano Shapiro, Fishman & Gache, LLP 2424 N. Federal Highway, Suite 360 Boca Raton, FL 33431-7701

Page 9 of 11 Services as servicer for RLF M c/o Shirley Palumbo, Esq. City Place 525 Okeechobee Blvd. Suite 900 West Palm Beach, FL 33401-6306

Nationstar Mortgage LLC Shapiro, Fishman & Gach, LLP c/o Elizabeth Eckhart 4630 Woodland Corporate Blvd Ste 100. Tampa, FL 33614-2429

AMERICAN EXPRESS CENTURION BANK C/O BECKET AND LEE LLP PO BOX 3001 MALVERN PA 19355-0701

BMW Bank of North America P.O. Box 201347 Arlington, TX 76006-1347

Bank of America N.A. P O Box 982284 El Paso, TX 79998-2284

Chase Card Po Box 15298 Wilmington, DE 19850-5298

Cynthia Prairie 14136 Bradbury Road Orlando FL 32828-4880

Dsnb Macys 9111 Duke Blvd Mason, OH 45040-8999

Internal Revenue Service Post Office Box 7346 Philadelphia PA 19101-7346

NATIONAL MORTGAGE LLC c/o Barry Fishman, Esq. 2424 N. Federal Highway Suite 360 Boca Raton, FL 33431-7780 Orange County Tax Collector

PO Box 545100 Orlando FL 32854-5100

Wells Fargo

Po Box 14517

Case 6:16-bk-05716-CCJ Doc 99 Filed 10/27/17 Page 10 of 11 Page 10 of 11

c/o Recovery Management Systems Corp attn: Ramesh Singh

25 S.E. 2nd Avenue, Suite 1120

Miami, FL 33131-1605

Wells Fargo Bank, N.A

MAC F8235-02F PO BOX 10438 DES MOINES, IA 50306-0438

P.O. Box 45038 MAC Z3057012 Jacksonville, FL 322325038

Wells Fargo Bank, N.A. Wells Fargo Card Services PO Box 10438, MAC F8235-02F Des Moines, IA 50306-0438

Wf Pll Po Box 94435 Albuquerque, NM 87199-4435

Des Moines, IA 50306-3517

Gene T Chambers + Post Office Box 533987 Orlando, FL 32853-3987 Laurie K Weatherford + Post Office Box 3450 Winter Park, FL 32790-3450

United States Trustee - ORL7/13 + Office of the United States Trustee George C Young Federal Building 400 West Washington Street, Suite 1100 Orlando, FL 32801-2210

Lindsey A Savastano + Shapiro Fishman and Gache, LLP 2424 North Federal Highway Suite 360 Boca Raton, FL 33431-7701

Elayne M Conrique + Perez Conrique Law 746 North Magnolia Avenue Orlando, FL 32803-3809

Viktoria Collins + Collins Law and Mediation 200 South Knowles Avenue Winter Park, FL 32789-4304 Shirley R Palumbo + Greenspoon Marder Law City Place 525 Okeechobee Boulevard, Suite 900 West Palm Beach, FL 33401-6306

Elizabeth Eckhart + Shapiro, Fishman & Gache 4630 Woodland Corporate Blvd Suite 100 Tampa, FL 33614-2429

Note: Entries with a  $\square + \square$  at the end of the name have an email address on file in CMECF

> The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

BMW Financial Services NA, LLC P.O. Box 3608 Dublin, OH 43016

Bankamerica Po Box 982238 El Paso, TX 79998

(d) Bmw Financial Services Po Box 3608 Dublin, OH 43016

Capital One 15000 Capital One Dr Richmond, VA 23238

(d) MTGLQ Investors, L. Pc/oShellpointMortgageSe Case 6:16-bk-05716-CCJ C. Doc 99 Filed 10/27/17 Page 11 of 11 Matrix PO Box 10826 Orlando Mailable recipients 45 Greenville, SC 29603-0826 Bypassed recipients 47 Total

2